FORM PTO/SB/08A/B (10-01) Substitute for PTO-1449A/B

INFORMATION DISCLOSURE

STATEMENT BY APPLICANT

(use as many sheets as necessary)

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Applicant(s)	Michael Treiman		
Group Art Unit	1743		
Examiner Name			

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EXAMINER INITIALS	Cite No. ¹	DOCUMENT NUMBER Number - Kind Code ² (If Known)	PUBLICATION DATE MM-DD-YYYY	NAME OF PATENTEE		
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